TRANSCHAPE TR	RANSMITTAL FORM all correspondence after initial for pages in This Submission	iling) 6	s are required to respond to a confidence of Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	Patent and T illection of inf 10/810,43: March 25, Victor Hsie 3625 Robert M. 352189-99	2004 Pond 91100
Amendm A A Extension Express Information Certified Documer Reply to Incomple	semittal Form Tee Attached Teent/Reply Infer Final Infidavits/declaration(s) In of Time Request Abandonment Request Ion Disclosure Statement Copy of Priority Int(s) Missing Parts/ Inter Application Reply to Missing Parts Inder 37 CFR 1.52 or 1.53	Remau The Cor	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence o	Address D	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): 1. Request for Continued Examination 2. Deposit Account Authorization 3. Return Postcard ge any deficiencies in fees and credit any 1896. A duplicate page is enclosed.
Firm Name	DLA Piper US LLP		OF APPLICANT, ATTO	PRNEY, C	DR AGENT
Printed name Date	Gerald T. Sekimura July 2007			Reg. No.	30,103
	nat this correspondence is be e as first class mail in an env pelow:	eing facsi	dressed to: Commissioner fo	O or depos	ILING sited with the United States Postal Service with P.O. Box 1450, Alexandria, VA 22313-1450 on

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Ta-Tanisha L. Henry

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Date

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- J.				Complete if Known							
Feese dant to the Consolid	ated Appropria	Nions Act, 2005 (H.R. 481	Application Nu	Application Number 10/8							
		MITTAL	Filing Date	Ma	March 25, 2004						
Fo	r FY 2	006	First Named In	ventor Vic	Victor Hsieh						
Applicant claims small	entity etatue	See 37 CER 1 27	Examiner Nam	e Ro	Robert M. Pond						
			Art Unit	36	3625						
TOTAL AMOUNT OF PAY	MENT (\$)	395.00	Attorney Docke	et No. 35	352189-991100						
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: 07-1896 Deposit Account Name: DLA Piper US LLP											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
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1. BASIC FILING, SEARCH, AND EXAMINATION FEES											
·	FILING	FEES SE	EARCH FEES	EXAMIN	IATION FEES						
Application Type	Fee (\$)	<u>Gmall Entity</u> <u>Fee (\$) </u>	Small Entity Pe (\$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pald (\$)					
Utility	300	150 50	00 250	200	100						
Design	200	100 10	00 50	130	65						
Plant	200	100 30	00 150	160	80						
Reissue	300	150 50	00 250	600	300						
Provisional	200	100	0 0	0	0						
2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent Claims											
20 or HP =	0	x <u></u>	0.00		Fee (\$)	Fee Paid (\$)					
HP = highest number of total Indep. Claims	claims paid for Extra Clair		Fee Paid (\$)								
1 - 3 or HP = 0 x 100 = 0.00											
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE											
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50											
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)											
- 100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)											
Other (e.g., late filing surcharge): Request for Continued Examination (RCE) Transmittal \$395.00											
SUBMITTED BY											

Registration No. (Attorney/Agent) 30,103 Telephone (415) 836-2500 Signature Date July 2007 Name (Print/Type) Gerald T. Sekimura

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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